

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SEIU COPE (Service Employees International Union Committee On Political Education)		FEC IDENTIFICATION NUMBER ▼ C C00004036
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee NG Slater Corp		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 18 / 2016
Mailing Address 42 W 38th St Ste 1002		Amount 138.85
City New York	State NY	Zip Code 10018
Purpose of Expenditure Estimated Cost: Buttons	Category/Type 006	Transaction ID : D363257 Date of Disbursement or Obligation MM / DD / YYYY 02 / 04 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 8885.92		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee SEIU General Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 18 / 2016
Mailing Address 1800 Massachusetts Ave NW		Amount 175.30
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Estimated Cost: Rally Signs	Category/Type 006	Transaction ID : D363259 Date of Disbursement or Obligation MM / DD / YYYY 02 / 15 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 8885.92		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	314.15
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY
02 / 19 / 2016

Signature